11/30/2010 15:39

Image# 10931854728

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Skilled Healthcare Group Inc. Political Action Committee 27442 Portola Parkway Suite 200 ADDRESS (number and street) Check if different than previously Foothill Ranch CA 92610 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00442426 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Special (30S) Post -Election General (30G) Report for the: Termination Report (TER) in the 02 2010 CA 11 Election on State of 10 0 1 2010 22 2010 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Jon Sadayasu Type or Print Name of Treasurer Electronically Filed by Jon Sadayasu 11 30 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/38

Write or Type Committee Name Skilled Healthcare Group Inc. Political Action Committee

FEC Form 3X (Rev. 02/2003)

_	Report Covering the Period: From:	COLUMN A	COLUMN B
	_	This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 Y Y Y		58279.42
	(b) Cash on Hand at Begining of Reporting Period	73596.46	
	(c) Total Receipts (from Line 19)	4807.44	27150.48
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78403.90	85429.90
7.	Total Disbursements (from Line 31)	1500.00	8526.00
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	76903.90	76903.90
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 38

Write or Type Committee Name

Skilled Healthcare Group Inc. Political Action Committee

Report Covering the Period:

From:

м м 1 0 D D 1

2 0 1 0

та.

м м 1 1 D D 22

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	(other than loans) From:		
	litical Committees ized (use Schedule A)	3775.84	17087.28
(ii) Unit	emized	1031.60	9963.20
(iii) TOT Line	AL (add s 11(a)(i) and (ii)	4807.44	27050.48
` '	Party Committees	0.00	0.00
(such as	PACs)ntributions (add Lines	0.00	0.00
	,(b) and (c)) (Carry Line 33, page 5)	4807.44	27050.48
	om Affiliated/Other tees	0.00	0.00
3. All Loans Red	ceived	0.00	0.00
	nents Receivedperating Expenditures	0.00	0.00
	bates, etc.) to Line 37, page 5) ontributions Made	0.00	0.00
to Federal car	andidates and Other mittees	0.00	100.00
 Other Federa (Dividends, Ir 	I Receipts lterest, etc.)	0.00	0.00
	m Non-Federal and Levin Funds		
(a) Non-Fede (from Scl	ral Account nedule H3)	0.00	0.00
(b) Levin Fun	ds (from Schedule H5)	0.00	0.00
(c) Total Tran	sfer (add 18(a) and 18(b)).	0.00	0.00
-	s (add Lines 11(d), s, 16, 17, and 18(c))	4807.44	27150.48
). Total Federal	Receipts 18(c) from Line 19)	4807.44	27150.48

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 38

II. DISBURSE		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditure (a) Shared Federal	es: Non Endoral		
Activity (from So		0.00	0.00
()	al Share	0.00	0.00
(b) Other Federal C			
Expenditures		0.00	0.00
(c) Total Operating (add 21(a)(i), (a	Expenditures (ii) and (b))	0.00	0.00
Transfers to Affiliated	•		
 Contributions to 		0.00	0.00
	Committees	0.00	500.00
		0.00	0.00
 Coordinated Expendi Committees (2 U.S.C (use Schedule F) 	tures Made by Party 2. 441a(d))	0.00	0.00
5. Loan Repayments M		0.00	0.00
'. Loans Made		0.00	0.00
B. Refunds of Contribut (a) Individuals/Pers	ions To:		
	ommittees	0.00	0.00
(b) Political Party C		0.00	0.00
(c) Other Political C (such as PACs)	ommittees	0.00	0.00
(d) Total Contribution		0.00	0.00
(add Lines 28(a)	, (b), and (c))	0.00	0.00
. Other Disbursements	i	1500.00	8026.00
	vity (2 U.S.C 431(20))		
(a) Shared Federal I	•		
(from Schedule F	′	0.00	0.00
	Ð	0.00	0.00
(b) Federal Election	Activity Paid Entirely	0.00	0.00
With Federal Fu (c) Total Federal El			
` '	30(a)(ii) and 30(b))	0.00	0.00
I. Total Disbursement	s (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 2	8(d), 29 and 30(c))	1500.00	8526.00
2. Total Federal Disbu			
(subtract Line 21(a)	(ii) and Line 30(a)(ii)		
from Line 31)		1500.00	8526.00

DETAILED SUMMARY PAGE

of Disbursements

5 / 38 FEC Form 3X (Rev. 02/2003)

	Contributions/Operating expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	tions (other than loans)	4807.44	27050.48
4. Total Contribu (from Line 28(tion Refunds d))	0.00	0.00
	ons (other than loans) 34 from Line 33)	4807.44	27050.48
	Operating Expenditures (i)(i) and Line 21(b))	0.00	0.00
	erating Expenditures page 3)	0.00	0.00
8. Net Operating (subtract Line	Expenditures 37 from Line 36)	0.00	0.00

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 38 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politica	I Action Com	nmittee	
۸.	Full Name (Last, First, Middle Initial) Kelly Atkins	2000		Date of Receipt
	Mailing Address 27442 Portola Pkwy #	200		10 08 2010
	City	State	Zip Code	Transaction ID: A2010-2916484
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		36.00
	Name of Employer Skilled Healthcare LLC	Occupatio Area Pre		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	720.00	
	Full Name (Last, First, Middle Initial) Kelly Atkins	Date of Receipt		
	Mailing Address 27442 Portola Pkwy #	10 22 2010		
	City	State	Zip Code	Transaction ID: A2010-2916710
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		36.00
	Name of Employer Skilled Healthcare LLC	Occupatio Area Pre	sident	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		756.00	
_	Full Name (Last, First, Middle Initial) Kelly Atkins	Date of Receipt		
	Mailing Address 27442 Portola Pkwy #200			M M / D D / Y Y Y Y Y Y 1 1 1 0 5 2 0 1 0
	City	State	Zip Code	Transaction ID: A2010-2994269
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		36.00
	Name of Employer Skilled Healthcare LLC	Occupatio Area Pre	sident	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		792.00	
	SUBTOTAL of Receipts This Page (optional)	1		108.00

A. Form/Schedule : SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the (Check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	e name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kelly Atkins Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For:		Date of Receipt M M M / D D / Y Y Y Y Y 1 1 1 9 2 0 1 0 Transaction ID: A2010-3018213 Amount of Each Receipt this Period 36.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Carrie Benefield Mailing Address 27637 Portola Pkwy		Date of Receipt M M
Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC	CA 92610 C Occupation	Transaction ID: A2010-2916454 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify)	Administrator Aggregate Year-to-Date ▼	650.00
Full Name (Last, First, Middle Initial) Carrie Benefield Mailing Address 27637 Portola Pkwy	‡ 200	Date of Receipt M M D D Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing	State Zip Code CA 92610	Transaction ID: A2010-2916587 Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer Skilled Healthcare LLC	Occupation Administrator	30.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	700.00
SUBTOTAL of Receipts This Page (optional)	1	136.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 38 (check only one) X
, c	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements made and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Skilled Healthcare Group Inc. Politica	al Action Com	mittee	
۱.	Full Name (Last, First, Middle Initial) Carrie Benefield Mailing Address 27637 Portola Pkwy #	1 200		Date of Receipt
				10 29 2010
	City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2994240 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02010	50.00
	Name of Employer Skilled Healthcare LLC	Occupatio Administ		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Carrie Benefield	Date of Receipt		
	Mailing Address 27637 Portola Pkwy #	1 1 1 2 2 0 1 0		
	City	State	Zip Code	Transaction ID: A2010-3018184
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer Skilled Healthcare LLC	Occupatio Administ		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		800.00	
_	Full Name (Last, First, Middle Initial) William A Crommett			Date of Receipt
	Mailing Address 27442 Portola Pkwy #	10 08 2010		
	City	State	Zip Code	Transaction ID: A2010-2916481
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Skilled Healthcare LLC	Occupatio CIOSVP	IT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional) .			140.00

or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politics Full Name (Last, First, Middle Initial) William A Crommett Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee.		Date of Receipt Date of Receipt 2 0 1 0		
Full Name (Last, First, Middle Initial) William A Crommett Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee.	#200 State Zip Code CA 92610 C	Transaction ID: A2010-2916707 Amount of Each Receipt this Period		
William A Crommett Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610 C Occupation	Transaction ID: A2010-2916707 Amount of Each Receipt this Period		
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610 C Occupation	Transaction ID: A2010-2916707 Amount of Each Receipt this Period		
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610 C Occupation	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	Occupation			
	·	-		
Name of Employer Skilled Healthcare LLC				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00			
Full Name (Last, First, Middle Initial) William A Commett	1	Date of Receipt		
Mailing Address 27442 Portola Pkwy	11 05 2010			
City	State Zip Code	Transaction ID: A2010-2994266		
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 40.00		
Name of Employer Skilled Healthcare LLC	Occupation CIOSVP IT			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00			
Full Name (Last, First, Middle Initial) William A Crommett		Date of Receipt		
Mailing Address 27442 Portola Pkwy				
City	State Zip Code	Transaction ID: A2010-3018210		
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 40.00		
Name of Employer Skilled Healthcare LLC	Occupation CIOSVP IT			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00			
SUBTOTAL of Receipts This Page (optional)		120.00		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 38 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Skilled Healthcare Group Inc. Politica	I Action Com	imittee	
۸.	Full Name (Last, First, Middle Initial) Huong Dang Mailing Address 2909 West Willits			Date of Receipt
	Mailing Address 2909 West Willits			10 08 2010
	City	State	Zip Code	Transaction ID: A2010-2916493
	Santa Ana	CA	92704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Skilled Healthcare LLC	Occupatio VP Interr		
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
_	Full Name (Last, First, Middle Initial) Huong Dang	Date of Receipt		
	Mailing Address 2909 West Willits	10 22 7 2010		
	City	State	Zip Code	Transaction ID: A2010-2916719
	Santa Ana	CA	92704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Skilled Healthcare LLC	Occupatio VP Interr	nal Audit	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		630.00	
_	Full Name (Last, First, Middle Initial) Huong Dang			Date of Receipt
	Mailing Address 2909 West Willits			1 1 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: A2010-2994278
	Santa Ana	CA	92704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Skilled Healthcare LLC	Occupatio VP Interr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 660.00	
	SUBTOTAL of Receipts This Page (optional) .			90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/38 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	ical Action Com	mittee	
Full Name (Last, First, Middle Initial) Huong Dang			Date of Receipt
Mailing Address 2909 West Willits	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Santa Ana	State CA	Zip Code 92704	Transaction ID: A2010-3018222 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	JE104	30.00
Name of Employer Skilled Healthcare LLC	Occupation VP Intern		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 690.00	
Full Name (Last, First, Middle Initial) Kelly Delk			Date of Receipt
Mailing Address 27442 Portola Pkwy #200			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2916495 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32010	25.00
Name of Employer Skilled Healthcare LLC	Occupation Area Pre		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Kelly Delk			Date of Receipt
Mailing Address 27442 Portola Pkwy #200			10 22 2010
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2916721 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	92010	25.00
Name of Employer Skilled Healthcare LLC	Occupation Area Pre		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (optional			80.00

SCHEDULE A (FEC Form 3: ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/38 (check only one)	
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	tical Action Com	mittee		
Full Name (Last, First, Middle Initial) Kelly Delk			Date of Receipt	
Mailing Address 27442 Portola Pkw	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2994280	
FEC ID number of contributing federal political committee.	C	92010	Amount of Each Receipt this Period 25.00	
Name of Employer Skilled Healthcare LLC	Occupation Area Pre			
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 550.00		
Full Name (Last, First, Middle Initial) Kelly Delk			Date of Receipt	
Mailing Address 27442 Portola Pkwy #200			M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 9 2 0 1 0	
City Foothill Ranch	State Zip Code nill Ranch CA 92610			
FEC ID number of contributing federal political committee.	C	92010	Amount of Each Receipt this Period 25.00	
Name of Employer Skilled Healthcare LLC	Occupation Area Pre			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 575.00		
Full Name (Last, First, Middle Initial) Robert Fancy			Date of Receipt	
Mailing Address 27442 Portola Parkway			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Foothill Rnach	State CA	Zip Code 96210	Transaction ID: A2010-2916498	
FEC ID number of contributing federal political committee.	C	30210	Amount of Each Receipt this Period 25.00	
Name of Employer Skilled Healthcare LLC	Occupation VP Risk	n Management		
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 400.00		
SUBTOTAL of Receipts This Page (option			75.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any Information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Po	and Statements may not be sold or used by any personing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	mical Action Committee	
Full Name (Last, First, Middle Initial) Robert Fancy		Date of Receipt
Mailing Address 27442 Portola Pa	arkway	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-2916724
Foothill Rnach	CA 96210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Skilled Healthcare LLC	Occupation VP Risk Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial) Robert Fancy		Date of Receipt
Mailing Address 27442 Portola Pa	arkway	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-2994283
Foothill Rnach	CA 96210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Skilled Healthcare LLC	Occupation VP Risk Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Robert Fancy		Date of Receipt
Mailing Address 27442 Portola Pa	arkway	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-3018227
Foothill Rnach	CA 96210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Skilled Healthcare LLC	Occupation VP Risk Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optic	onal)	75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 38 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	nd Statements may not be sold or used by any per g the name and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Christopher Felfe Mailing Address 27442 Portola Pkw	yy #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing	State Zip Code CA 92610	1 0 0 8 2 0 1 0 Transaction ID: A2010-2916488 Amount of Each Receipt this Period 25.00
federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation CAO Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Christopher Felfe Mailing Address 27442 Portola Pkw	yy #200	Date of Receipt 1 0 2 2 2 2 1 0
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2916714 Amount of Each Receipt this Period 25.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation CAO Aggregate Year-to-Date 525.00	
Full Name (Last, First, Middle Initial) Christopher Felfe Mailing Address 27442 Portola Pkw	yy #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	1 1 0 5 2 0 1 0 Transaction ID: A2010-2994273 Amount of Each Receipt this Period 25.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation CAO Aggregate Year-to-Date 550.00	
SUBTOTAL of Receipts This Page (option	al)	75.00

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 38 (check only one) X 11a
Any information copied from such Re or for commercial purposes, other th	an using the name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Skilled Healthcare Group Ind		nmittee	
Full Name (Last, First, Middle Init Christopher Felfe	,		Date of Receipt
Mailing Address 27442 Porto City	Ia Pkwy #200 State	Zip Code	1 1 1 9 2 0 1 0 Transaction ID: A2010-3018217
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Skilled Healthcare LLC	Occupatio CAO	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 575.00	
Full Name (Last, First, Middle Init	,		Date of Receipt
Mailing Address 27442 Porto	la Pkwy #200		10 08 2010
City	State	Zip Code	Transaction ID: A2010-2916485
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Skilled Healthcare LLC	Occupation VPO	on	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Init C. Denise German	ial)		Date of Receipt
Mailing Address 27442 Porto	la Pkwy #200		10 22 YYYY 2010
City	State	Zip Code	Transaction ID: A2010-2916711
Fec ID number of contributing federal political committee.	CA	92610	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC	Occupatio VPO	on	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page	(optional)		65.00
TOTAL This Period (last page this			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 38 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politic	he name and add	ress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Denise German Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General	State CA C Occupation VPO	Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y 1 1 1 0 5 2 0 1 0 Transaction ID: A2010-2994270 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Denise German Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General	State CA C Occupation VPO	Zip Code 92610 Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeanette Haskins Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For:	State CA C Occupation Director o	Zip Code 92610 If Human Resources Year-to-Date ▼	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		210.00	55.00

SCHEDULE A (FEC Form 3: ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18/38 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may g the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
Skilled Healthcare Group Inc. Polit	tical Action Com	mittee	
Full Name (Last, First, Middle Initial) Boyd W Hendrickson			Date of Receipt
Mailing Address 27442 Portola Pkw	vy #200		10 08 7 2010
City <u>Foothill Ranch</u>	State CA	Zip Code 92610	Transaction ID: A2010-2916480 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Skilled Healthcare LLC	Occupation CEO	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4000.00	
Full Name (Last, First, Middle Initial) Boyd W Hendrickson	 		Date of Receipt
Mailing Address 27442 Portola Pkw	vy #200		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2916706 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3E010	200.00
Name of Employer Skilled Healthcare LLC	Occupation CEO	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4200.00	
Full Name (Last, First, Middle Initial) Boyd W Hendrickson	I		Date of Receipt
Mailing Address 27442 Portola Pkw	vy #200		1 1 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2994265 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32010	200.00
Name of Employer Skilled Healthcare LLC	Occupation CEO	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4400.00	
SUBTOTAL of Receipts This Page (option	al)		600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 38 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politic	d Statements may not be sold or used by any personant the name and address of any political committee to cal Action Committee	
Full Name (Last, First, Middle Initial) Boyd W Hendrickson Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D D 2010 Transaction ID: A2010-3018209 Amount of Each Receipt this Period 200.00
Full Name (Last, First, Middle Initial) Kristiina Hintgen Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary Other (specify)	#200 State Zip Code CA 92610 C Occupation SVP HR Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kristina Hintgen Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	State Zip Code CA 92610 C Occupation SVP HR Aggregate Year-to-Date 420.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional))	240.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	f	Jse separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 38 (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not	be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Po	itical Action Commit	tee	
Full Name (Last, First, Middle Initial) Kristiina Hintgen			Date of Receipt
Mailing Address 27442 Portola Pk	wy #200		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State CA	Zip Code 92610	Transaction ID: A2010-2994275
FEC ID number of contributing federal political committee.	C	92010	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC	Occupation SVP HR		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Kristiina Hintgen Mailing Address 27442 Portola Pk	wy #200		Date of Receipt
City	State	Zip Code	1 1 1 9 2 0 1 0 Transaction ID: A2010-3018219
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Skilled Healthcare LLC	Occupation SVP HR		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 460.00	
Full Name (Last, First, Middle Initial) Michele J Kaufman			Date of Receipt
Mailing Address 24325 Armada D	rive		M M / D D / Y Y Y Y Y 1 1 0 1 0 1 0 1 0 1 0 1 0 1 0
City Dana Point	State CA	Zip Code 92629	Transaction ID: A2010-2916718 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Skilled Healthcare LLC	Occupation Director Exe	cutive Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (option	nal)		50.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	ical Action Com	mittee	
Full Name (Last, First, Middle Initial) Michele J Kaufman			Date of Receipt
Mailing Address 24325 Armada Driv	/e		M M / D D / Y Y Y Y Y Y 1 1 1 0 5 2 0 1 0
City Dana Point	State CA	Zip Code 92629	Transaction ID: A2010-2994277 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02020	10.00
Name of Employer Skilled Healthcare LLC	Occupation Director	n Executive Services	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Michele J Kaufman			Date of Receipt
Mailing Address 24325 Armada Driv	/e		M M / D D / Y Y Y Y Y 1 1 1 1 9 2 0 1 0
City Dana Point	State CA	Zip Code 92629	Transaction ID: A2010-3018221 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	JEGES .	10.00
Name of Employer Skilled Healthcare LLC	Occupation	n Executive Services	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Lorraine Kozloski			Date of Receipt
Mailing Address 534 Via Estrada Ur	nit A		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Laguna Woods	State CA	Zip Code 92637	Transaction ID: A2010-2916491 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32007	20.00
Name of Employer Skilled Healthcare LLC	Occupation Accounta		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional	J		40.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 38 (check only one) X
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
<u>/</u> A.	Full Name (Last, First, Middle Initial) Lorraine Kozloski			Date of Receipt
Λ.	Mailing Address 534 Via Estrada Unit A			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Laguna Woods	State CA	Zip Code 92637	Transaction ID: A2010-2916717 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Skilled Healthcare LLC	Occupatio Accounta		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
В.	Full Name (Last, First, Middle Initial) Lorraine Kozloski Mailing Address 534 Via Estrada Unit A			Date of Receipt
	City	State	Zip Code	1 1 0 5 2 0 1 0 Transaction ID: A2010-2994276
	Laguna Woods	CA	92637	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Skilled Healthcare LLC	Occupatio Accounta		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 440.00	
- C.	Full Name (Last, First, Middle Initial) Lorraine Kozloski			Date of Receipt
	Mailing Address 534 Via Estrada Unit A			111 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Laguna Woods	State CA	Zip Code 92637	Transaction ID: A2010-3018220
	FEC ID number of contributing federal political committee.	C	32037	Amount of Each Receipt this Period 20.00
	Name of Employer Skilled Healthcare LLC	Occupatio Accounta		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 460.00	
	SUBTOTAL of Receipts This Page (optional)			60.00
	TOTAL This Period (last page this line number of	only))	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23/38 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	ical Action Com	mittee	
Full Name (Last, First, Middle Initial) Zachary Larson			Date of Receipt
Mailing Address 27442 Portola Park	way		10 08 2010
City Foothill Ranch	State CA	Zip Code 96210	Transaction ID: A2010-2916499 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	332.0	25.00
Name of Employer Skilled Healthcare LLC	Occupation Associate	n e Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Zachary Larson			Date of Receipt
Mailing Address 27442 Portola Park	kway		10 22 YYYYY
City Foothill Ranch	State CA	Zip Code 96210	Transaction ID: A2010-2916725
FEC ID number of contributing federal political committee.	C	30210	Amount of Each Receipt this Period 25.00
Name of Employer Skilled Healthcare LLC	Occupation	n e Counsel	
Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · ·	Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial) Zachary Larson			Date of Receipt
Mailing Address 27442 Portola Park	kway		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch	State CA	Zip Code 96210	Transaction ID: A2010-2994284 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30210	25.00
Name of Employer Skilled Healthcare LLC	Occupation Associate	n e Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions
Skilled Healthcare Group Inc. Politic	cal Action Committee	
Full Name (Last, First, Middle Initial) Zachary Larson		Date of Receipt
Mailing Address 27442 Portola Park		11 1 19 / 2010
City Foothill Ranch	State Zip Code CA 96210	Transaction ID: A2010-3018228 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Skilled Healthcare LLC	Occupation Associate Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt
Mailing Address 27442 Portola Pkwy	<i>y</i> #200	10 08 2010
City	State Zip Code	Transaction ID: A2010-2916486
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Skilled Healthcare LLC	Occupation SVP Director of Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	
Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt
Mailing Address 27442 Portola Pkwy	<i>,</i> #200	10 22 2010
City Foothill Ranch	State Zip Code CA 92610	Transaction ID: A2010-2916712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	38.46
Name of Employer Skilled Healthcare LLC	Occupation SVP Director of Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	
CURTOTAL of Passints This Page (entires	l)	101.92

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any persor ing the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Skilled Healthcare Group Inc. Po	Ditical Action Committee	
Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt
Mailing Address 27442 Portola P	kwy #200	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-2994271
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 38.46
Name of Employer Skilled Healthcare LLC	Occupation SVP Director of Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	
Full Name (Last, First, Middle Initial) Frederic Maas	I	Date of Receipt
Mailing Address 27442 Portola P	kwy #200	1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: A2010-3018215
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Skilled Healthcare LLC	Occupation SVP Director of Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	
Full Name (Last, First, Middle Initial) Richard Mainville	I	Date of Receipt
Mailing Address PO Box 248		10 22 2010
City Silverado	State Zip Code CA 92676	Transaction ID: A2010-2916720
FEC ID number of contributing federal political committee.	CA 92676	Amount of Each Receipt this Period 10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Manager	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (opti	onal)	86.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26/38 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	cal Action Com	mittee	
Full Name (Last, First, Middle Initial) Richard Mainville			Date of Receipt
Mailing Address PO Box 248			11 05 2010
City	State	Zip Code	Transaction ID: A2010-2994279
Silverado	CA	92676	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Ma		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Richard Mainville			Date of Receipt
Mailing Address PO Box 248			11 19 2010
City	State CA	Zip Code	Transaction ID: A2010-3018223
Silverado FEC ID number of contributing federal political committee.	C	92676	Amount of Each Receipt this Period 10.00
Name of Employer Skilled Healthcare LLC	Occupation Cash Ma		
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		230.00	
Full Name (Last, First, Middle Initial) Jimmy Melton			Date of Receipt
Mailing Address 27442 Portola Pkw	y #200		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: A2010-2916551
Foothill Ranch	CA	92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Skilled Healthcare LLC		e Director	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify) ▼		240.00	
SUBTOTAL of Receipts This Page (optional	l)		40.00
TOTAL This Period (last page this line num	her only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 38 (check only one) X 11a
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	nd Statements may not be sold or used by any po the name and address of any political committe ical Action Committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jimmy Melton Mailing Address 27442 Portola Pkw City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC	State Zip Code CA 92610 C Occupation Executive Director	Date of Receipt 10 22 2010 Transaction ID: A2010-2916777 Amount of Each Receipt this Period 20.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Jimmy Melton Mailing Address 27442 Portola Pkw City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer	State Zip Code CA 92610 C	Date of Receipt M M M
Skilled Healthcáre LLC Receipt For: Primary General Other (specify) ▼	Executive Director Aggregate Year-to-Date ▼ 280.00	•
Full Name (Last, First, Middle Initial) Jimmy Melton Mailing Address 27442 Portola Pkw City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Date of Receipt M M M
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date 300.00	•
SUBTOTAL of Receipts This Page (options	al)	60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	Action Com	mittee	
/ Full Name (Last, First, Middle Initial) Donna Miller			Date of Receipt
Mailing Address 1501 S. Beach Blvd #K	(-1007		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: A2010-2916576
La Habra	CA	90631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Skilled Healthcare LLC	Occupation		
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Donna Miller			Date of Receipt
Mailing Address 1501 S. Beach Blvd #K	K-1007		M M / D D / Y Y Y Y Y Y Y 1 1 0 2 9 2 0 1 0
City	State	Zip Code	Transaction ID: A2010-2994229
<u>La Habra</u>	CA	90631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer Skilled Healthcare LLC	Occupation Director		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Donna Miller			Date of Receipt
Mailing Address 1501 S. Beach Blvd #K	(-1007		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: A2010-3018173
<u>La Habra</u>	CA	90631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Skilled Healthcare LLC	Occupation Director		7
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)			30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Political	Statements may not be sold or used by any pers he name and address of any political committee to al Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Roland Rapp Mailing Address 27442 Portola Pkwy City Foothill Ranch FEC ID number of contributing federal political committee. Name of Employer Skilled Healthcare LLC Receipt For:	#200 State Zip Code CA 92610 C Occupation General Counsel/CAO Aggregate Year-to-Date	Date of Receipt M M M O 8 2010 Transaction ID: A2010-2916482 Amount of Each Receipt this Period 192.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Roland Rapp Mailing Address 27442 Portola Pkwy	#200	Date of Receipt 1 0 2 2 2 2 1 0 1 0
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610 C Occupation	Transaction ID: A2010-2916708 Amount of Each Receipt this Period 192.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	General Counsel/CAO Aggregate Year-to-Date ▼ 3840.00	
Full Name (Last, First, Middle Initial) Roland Rapp Mailing Address 27442 Portola Pkwy	#200	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2994267 Amount of Each Receipt this Period 192.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation General Counsel/CAO Aggregate Year-to-Date 4032.00	
SUBTOTAL of Receipts This Page (optional)		576.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 38 (check only one) X
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politica	l Action Com	nmittee	
Α.	Full Name (Last, First, Middle Initial) Roland Rapp			Date of Receipt
	Mailing Address 27442 Portola Pkwy #	200		11 19 2010
	City Foothill Ranch	State CA	Zip Code	Transaction ID: A2010-3018211
	FEC ID number of contributing federal political committee.	C	92610	Amount of Each Receipt this Period 192.00
	Name of Employer Skilled Healthcare LLC	Occupatio General	on Counsel/CAO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4224.00	
- В.	Full Name (Last, First, Middle Initial) Scott C Robinson			Date of Receipt
	Mailing Address 717 W. Balboa Blvd.			10 01 2010
	City	State	Zip Code	Transaction ID: A2010-2916444
	Balboa FEC ID number of contributing	CA	92661	Amount of Each Receipt this Period
	federal political committee.	C		15.00
	Name of Employer Skilled Healthcare LLC	Occupation Presiden	on at Hospice	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
- C.	Full Name (Last, First, Middle Initial) Scott C Robinson			Date of Receipt
	Mailing Address 717 W. Balboa Blvd.			10 15 2010
	City	State	Zip Code	Transaction ID: A2010-2916577
	Balboa FEC ID number of contributing federal political committee.	CA	92661	Amount of Each Receipt this Period 15.00
	Name of Employer Skilled Healthcare LLC	Occupation Presiden	on at Hospice	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 315.00	
	SUBTOTAL of Receipts This Page (optional) .			222.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 38 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politic	he name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Scott C Robinson Mailing Address 717 W. Balboa Blvd.		Date of Receipt
City Balboa FEC ID number of contributing	State Zip Code CA 92661	1 0 2 9 2 0 1 0 Transaction ID: A2010-2994230 Amount of Each Receipt this Period 15.00
Receipt For: Primary Other (specify)	Occupation President Hospice Aggregate Year-to-Date 330.00	
Full Name (Last, First, Middle Initial) Scott C Robinson Mailing Address 717 W. Balboa Blvd.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City <u>Balboa</u> FEC ID number of contributing federal political committee.	State Zip Code CA 92661	Transaction ID: A2010-3018174 Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation President Hospice Aggregate Year-to-Date 345.00	
Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkwy	#200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2916489 Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation VP Finance Controller Aggregate Year-to-Date 400.00	
SUBTOTAL of Receipts This Page (optional)		50.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 38 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politics	nd Statements may not be sold or used by any per grade the name and address of any political committee tical Action Committee	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkw	ny #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing	State Zip Code CA 92610	Transaction ID: A2010-2916715 Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary Other (specify)	Occupation VP Finance Controller Aggregate Year-to-Date 420.00	
Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkw	y #200	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: A2010-2994274
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General	Occupation VP Finance Controller Aggregate Year-to-Date 440.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Jon Sadayasu Mailing Address 27442 Portola Pkw		Date of Receipt
		11 19 2010
City <u>Foothill Ranch</u>	State Zip Code CA 92610	Transaction ID: A2010-3018218 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Skilled Healthcare LLC	Occupation VP Finance Controller	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
	al)	60.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 38 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Poli	and Statements may not be sold or used by any persong the name and address of any political committee to tical Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Aisha Salaam Mailing Address 27442 Portola Pkv	vy #200	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2916483 Amount of Each Receipt this Period 50.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation SVP Professional Services Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Aisha Salaam Mailing Address 27442 Portola Pkv	vy #200	Date of Receipt 1 0 2 2 2 2 0 1 0
City Foothill Ranch FEC ID number of contributing	State Zip Code CA 92610	Transaction ID: A2010-2916709 Amount of Each Receipt this Period
federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation SVP Professional Services Aggregate Year-to-Date 1050.00	50.00
Full Name (Last, First, Middle Initial) Aisha Salaam Mailing Address 27442 Portola Pkv	vv #200	Date of Receipt
City Foothill Ranch	State Zip Code CA 92610	Transaction ID: A2010-2994268 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Skilled Healthcare LLC	Occupation SVP Professional Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	al)	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politi	the name and address of any political c	by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Aisha Salaam Mailing Address 27442 Portola Pkw	v #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-3018212 Amount of Each Receipt this Period 50.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation SVP Professional Services Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27630 Portola Pkwy	/ #200	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2916582 Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify)	Occupation Sr VP Operations Support Aggregate Year-to-Date ▼	10.00
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27630 Portola Pkw	/ #200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	1 0 2 9 2 0 1 0 Transaction ID: A2010-2994235 Amount of Each Receipt this Period 15.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Sr VP Operations Support Aggregate Year-to-Date ▼	25.00
SUBTOTAL of Receipts This Page (optional)	80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Politica	Statements may not be sold or used by any person e name and address of any political committee to	
Full Name (Last, First, Middle Initial) Carl Sebern Mailing Address 27630 Portola Pkwy # City Foothill Ranch FEC ID number of contributing		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Sr VP Operations Support Aggregate Year-to-Date 240.00]
Full Name (Last, First, Middle Initial) Peter Stong Mailing Address 27442 Portola Pkwy #	\$200 State Zip Code	Date of Receipt M
Foothill Ranch FEC ID number of contributing federal political committee.	CA 92610	Amount of Each Receipt this Period 35.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation VPO Aggregate Year-to-Date 385.00]
Full Name (Last, First, Middle Initial) Peter Stong Mailing Address 27442 Portola Pkwy #	£200	Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State Zip Code CA 92610	Transaction ID: A2010-2916795 Amount of Each Receipt this Period 35.00
Name of Employer Skilled Healthcare LLC Receipt For:	Occupation VPO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		85.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 38 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Skilled Healthcare Group Inc. Polit	the name and addr	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Peter Stong Mailing Address 27442 Portola Pkw	y #200		Date of Receipt
City Foothill Ranch FEC ID number of contributing	State CA	Zip Code 92610	Transaction ID: A2010-2994354 Amount of Each Receipt this Period 35.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary Other (specify)	Occupation VPO	Year-to-Date ▼ 455.00	
Full Name (Last, First, Middle Initial) Peter Stong Mailing Address 27442 Portola Pkw	y #200		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Foothill Ranch FEC ID number of contributing federal political committee.	State CA	Zip Code 92610	Transaction ID: A2010-3018297 Amount of Each Receipt this Period 35.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation VPO Aggregate V	Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial) Mary Thurber Mailing Address 27442 Portola Pkw	y #200		Date of Receipt
City Foothill Ranch FEC ID number of contributing federal political committee.	State CA	Zip Code 92610	Transaction ID: A2010-2916441 Amount of Each Receipt this Period 20.00
Name of Employer Skilled Healthcare LLC Receipt For: Primary General Other (specify) ▼	Occupation Administra Aggregate		
SUBTOTAL of Receipts This Page (optional	 (la	>	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 38 (check only one) X 11a 11b 11c 12
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
Skilled Healthcare Group Inc. Politica Full Name (Last, First, Middle Initial)	al Action Committee	
Mary Thurber Mailing Address 27442 Portola Pkwy	#200	Date of Receipt
City	State Zip Code	1 0 1 5 2 0 1 0 Transaction ID: A2010-2916574
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Mary Thurber		Date of Receipt
Mailing Address 27442 Portola Pkwy	#200	10 29 2010
City	State Zip Code	Transaction ID: A2010-2994227
Foothill Ranch	CA 92610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	440.00	
Full Name (Last, First, Middle Initial) Mary Thurber		Date of Receipt
Mailing Address 27442 Portola Pkwy	#200	M M / D D / Y Y Y Y Y 1 1 1 1 2 2 0 1 0
City <u>Foothill Ranch</u>	State Zip Code CA 92610	Transaction ID: A2010-3018171 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Skilled Healthcare LLC	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
SUBTOTAL of Receipts This Page (optional)		60.00
	er only)	3775.84

Any Inform	·	fs for each category of the Detailed Summary Page	(check onl 21b 27 ed by any person	NUMBER: PAGE 38 / 38 y one) 22 23 24 25 26 28a 28b 28c X 29 30b for the purpose of soliciting contributions blicit contributions from such committee
NAME Skilled	OF COMMITTEE (In Full) d Healthcare Group Inc. Poli	<u> </u>		
Texar	ame (Last, First, Middle Initial) as for Tommy Williams g Address P.O. Box 8069			Transaction ID: B372691 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpos P-2012 Candio	Voodlands se of Disbursement 2 State Senate 04 TX date Name ny Williams	State Zip Code TX 77387	011 Category/ Type	Amount of Each Disbursement this Period 1500.00
Office State:	Sought: House Senate President District:	Disbursement For: 2012 X Primary General Other (specify) ▼	1	

SUBTOTAL of Disbursements This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	<u> </u>	1500.00